



CA: _____
SCAN/ATTACH: _____
FILE: _____

Junior Liability Waiver (Under 18)

Player's Name: _____ DOB: _____

Parent/Legal Guardian Name: _____ City of Residence: _____

Cell: _____ Email: _____

Emergency Contact Information

Emergency Contact #1:

Name: _____

Cell: _____ Relationship to Player: _____

NOTE ON EMAIL: We respect inboxes and never share your information with third parties. Please don't skip the email field as it's our primary way to get in touch with you.
-Thank you!

Waiver of Liability

Any athletic or physical activity involves certain risk. The undersigned parent/legal guardian of Player assume the risk of any and all accidents or injuries of any kind, including death, that may be sustained by, or in connection with the facilities and release, hold the club harmless, discharge and absolve the club, its officers, owners, agents and employees, from any and all liability or responsibility in connection therewith. I understand that Murray Hill Tennis & Fitness is not responsible for any lost, stolen, or damaged valuables or property.

Please provide additional detail or information with respect to any health (including allergies, medications, etc.) or other issues concerning the Player that the Club should be aware of:

Does this Player have any Mental, Social or Emotional Health Concerns?

- NO mental, social or emotional concerns
- Diagnosed with ADD or ADHD
- Psychiatric (depression, OCD, panic/anxiety)
- Has a learning challenge (disability)
- Has seen or is currently seeing a professional
- Had a significant life event occur, stress inducing
- Other mental, social or emotional health concern

Please explain the Mental, Social or Emotional health concern(s) selected above: _____

Yes, I grant Murray Hill Tennis & Fitness the right to take photographs of the child(ren) listed above. I authorize Murray Hill Tennis & Fitness to use and publish my child(ren)'s photos in print and/or electronically (including for example, website content & social media content).

Please do not use any photos of my child(ren).

Signature Parent/Guardian: _____ Print Name: _____

Date: _____